

# STATE OF KANSAS

## KANSAS ANIMAL HEALTH DEPARTMENT

**George Teagarden, Livestock Commissioner**

708 SW Jackson Topeka, Kansas 66603-3714

Phone (785) 296-2326 FAX (785) 296-1765

[www.kansas.gov/kaht](http://www.kansas.gov/kaht)

---

### APPLICATION FOR OCCASIONAL LIVESTOCK SALE LICENSE

1-2 sales per year.....\$ 25.00

3-5 sales per year.....\$ 50.00

6-9 sales per year.....\$ 75.00

10-12 sales per year.....\$100.00

Market name:\_\_\_\_\_

Owner/operator name:\_\_\_\_\_

NAIS Premises Registration Number: \_\_\_\_\_

Mailing address:\_\_\_\_\_

Premise 911 address (if different from above):\_\_\_\_\_

Premise phone:\_\_\_\_\_ County:\_\_\_\_\_

Market veterinarian:\_\_\_\_\_

Date(s) when market will be operated:\_\_\_\_\_

Type(s) of livestock to be sold (livestock includes cattle, swine, sheep, goats, horses, mules, domesticated deer, and ratites):\_\_\_\_\_

Other types of animals to be sold:\_\_\_\_\_

**Please note:** the sale of animals other than livestock may require that you obtain a temporary pet shop license for your sale. Please contact the Kansas Animal Health Department for more information.

The following information must be submitted before an application can be processed.

1. Statement of all assets and liabilities of the applicant(s).
2. Name and address of all persons having any financial interest in the market/sale and amount of such interest.
3. Complete description of the facilities proposed to be used in connection with the market/sale.
4. Schedule of commission charges.

Information on this application and the required attachments set out through numbers 1 through 4 above, are hereby incorporated by reference.

\_\_\_\_\_  
Signature of applicant  
Social Security Number (voluntary):\_\_\_\_\_

\_\_\_\_\_  
Date

OFFICE USE ONLY	
Entered in Database _____	by _____

There is a returned check fee of \$30.00 for checks which are dishonored and returned unpaid to the KAHD for any reason.